Affidavit of Sheriff, Chief of Police, or District Attorney With Respect to Elector Request for Confidential Listing

	TE OF WISCONSIN SS. County ounty of notarization)		
	only of nomination)		
To:	Name of municipal clerk		
	Municipality and County		_
This	affidavit is given in support of a re	equest for a confidential listing on a vot	er list.
Ther	re has been a charge or convic	ction with respect to an offense relating	to domestic abuse, sexual assault, or stalking
The	individual named below was a vict	im of that offense and continues to be the	hreatened.
	Name o	of protected individual	
	Street a	address	
	Munici	ipality, state and zip code	
Date		Signature of sheriff or chi	ef of police
		Name of jurisdiction	
		•	
Subse	cribed and sworn to before me this	day of	··
	(: 4 C 4 : 14	1::2	
	(signature of person authorized to	,	
Му с	commission expires	, or is permanent \square	
Notai	ry Public 1 , or		
	(official title	e, if not a notary)	
with convi	an offense relating to domestic abuse, iction has been vacated, and the charg	sexual assault, or stalking is no longer so c	ains information that the person who was charged harged or that the person's judgement of fidavit, the sheriff or chief shall provide written
1	The person above who was charged with an offense relating to domestic abuse, sexual assault or stalking with respect t the protected individual named above is no longer charged. This charge was the sole basis for this affidavit. Therefore the individual named above no longer is entitled to protection under s.6.47, Wis. Stats.		
1	The conviction of the person with an offense relating to domestic abuse, sexual assault or stalking with respect to the protected individual named above has been vacated. The conviction was the sole basis for this affidavit. Therefore, the individual named above is no longer entitled to protection under s.6.47, Wis. Stats.		
Date		Signature of sheriff or pol	ice chief
		Name of jurisdiction	